

Please type a plus sign (+) inside this box →

UTILITY PATENT APPLICATION TRANSMITTAL		02/07/01
(Only for new nonprovisional applications under 37 CFR 1.53(b))		pro 100-0702-02
APPLICATION ELEMENTS		Attorney Docket No. First Inventor Title Express Mail Label No.
See MPEP chapter 600 concerning utility patent application contents.		

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 41]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 36]
5. Oath or Declaration [Total Pages 1]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)

i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
-------------	--

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS	
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input checked="" type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/> Preliminary Amendment	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. <input type="checkbox"/> Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No.: _____

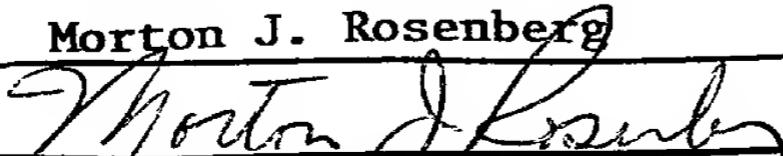
Group Art Unit: _____

Prior application information:

Examiner _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	04586 <small>PATENT TRADEMARK OFFICE</small>		or <input checked="" type="checkbox"/> Correspondence address below		
Name	Morton J. Rosenberg, Esq. Rosenberg, Klein & Lee				
Address	3458 Ellicott Center Drive - Suite 101				
City	Ellicott City	State	MD	Zip Code	21043
Country	USA	Telephone	410-465-6678	Fax	410-461-3067
Name (Print/Type)	Morton J. Rosenberg		Registration No. (Attorney/Agent)	26,049	
Signature			Date	6 Feb. 2001	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 395.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Vincent F. Elliott
Examiner Name	
Group Art Unit	
Attorney Docket No.	MR2903-2

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge deficiencies of fees and credit any overpayments to:

Deposit Account Number **18-2011**

Deposit Account Name **Rosenberg, Klein & Lee**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	\$ 355
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$ 355)

EXTRA CLAIM FEES

Total Claims	20	Extra Claims	Fee from below	Fee Paid
Independent Claims	3	-20** = 0	X 9 = 0	0
Multiple Dependent		- 3** = 0	X 40 = 0	0
			135	0

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
105	130	205	65 Surcharge - late filing fee or oath	
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for ex parte reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	390	216	195 Extension for reply within second month	
117	890	217	445 Extension for reply within third month	
118	1,390	218	695 Extension for reply within fourth month	
128	1,890	228	945 Extension for reply within fifth month	
119	310	219	155 Notice of Appeal	
120	310	220	155 Filing a brief in support of an appeal	
121	270	221	135 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,240	241	620 Petition to revive - unintentional	
142	1,240	242	620 Utility issue fee (or reissue)	
143	440	243	220 Design issue fee	
144	600	244	300 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	130	123	130 Petitions related to provisional applications	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	40.00
146	710	246	355 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

Name (Print/Type)	Morton J. Rosenberg	Registration No. (Attorney/Agent)	26,049	Complete (if applicable)
Signature		Telephone	410-465-6678	
		Date	6 Feb. 2001	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.